



Mayor Jerramiah T. Healy,
The Jersey City Municipal Council
&
The Jersey City Department of Recreation
present



2009 Summer Golf

@

Lincoln Park Golf Range
Duncan Ave and Route 440
Monday through Thursday

Dates: July 6th - August 7th

Time: 11:00A.M. - 12:30P.M

Ages: 7 - 15

Admission: Free

*Proper Attire Required: golf glove, sneakers, plastic water bottle

Golf Registration

Name: _____ Birth Date: ____/____/____

Address: _____ Age: ____ Grade: ____

School: _____ Phone#: _____-_____-_____

AGREEMENT: In signing this application, I believe that my child is qualified physically and mentally for the "2009 Summer Golf Program". I agree to place my child in the care of the staff, subject to all its rules and requirements. In the event that I can not be reached in an emergency, I give my permission to the physician or designated hospital selected by the staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child.

Print Name: _____ Signature: _____ Date: _____

Parent's Signature _____

Please complete and return registration form to:

Department of Recreation - Golf
1 Chapel Avenue
Jersey City, NJ 07305
or fax information to 201-547-4586

Registration Deadline: 07/1/2009

www.jerseycitynj.gov